

County: Forest
CRANDON NURSING HOME, THE
105 WEST PIONEER, P. O. BOX 400
CRANDON 54520 Phone: (715) 478-3324
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 82
Total Licensed Bed Capacity (12/31/01): 82
Number of Residents on 12/31/01: 79

Facility ID: 2430

Page 1

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 79

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		16.5
Supp. Home Care-Personal Care	No					1 - 4 Years		44.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.1	More Than 4 Years		39.2
Day Services	No	Mental Illness (Org./Psy)	36.7	65 - 74	8.9			-----
Respite Care	No	Mental Illness (Other)	5.1	75 - 84	31.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.3	95 & Over	6.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	10.1		100.0	(12/31/01)		
Other Meals	Yes	Cardiovascular	16.5	65 & Over	94.9	-----		
Transportation	No	Cerebrovascular	11.4		-----	RNs		13.8
Referral Service	No	Diabetes	8.9	Sex	%	LPNs		5.2
Other Services	No	Respiratory	7.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	2.5	Male	27.8	Aides, & Orderlies		
Mentally Ill	No		-----	Female	72.2			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Per Di em (\$)	Total Resi - dents	% Of All
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	No.	%				
Int. Skilled Care	0	0.0	0	2	3.3	115	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	2	2.5
Skilled Care	6	100.0	277	55	90.2	98	0	0.0	0	9	75.0	115	0	0.0	0	0	0.0	70	88.6
Intermediate	---	---	---	4	6.6	81	0	0.0	0	3	25.0	115	0	0.0	0	0	0.0	7	8.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	6	100.0		61	100.0		0	0.0		12	100.0		0	0.0		0	0.0	79	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	32.1	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	24.1	32.9	43.0	79
Other Nursing Homes	10.7	Dressing	26.6	31.6	41.8	79
Acute Care Hospitals	53.6	Transferring	49.4	34.2	16.5	79
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	49.4	36.7	13.9	79
Rehabilitation Hospitals	0.0	Eating	81.0	0.0	19.0	79
Other Locations	3.6	*****				
Total Number of Admissions	28	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	3.8	Receiving Respiratory Care		8.9
Private Home/No Home Health	28.0	Occ/Freq. Incontinent of Bladder	46.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	12.0	Occ/Freq. Incontinent of Bowel	44.3	Receiving Suctioning		1.3
Other Nursing Homes	12.0			Receiving Ostomy Care		1.3
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		1.3
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	13.9	Receiving Mechanically Altered Diets		41.8
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	48.0	With Pressure Sores	2.5	Have Advance Directives		96.2
Total Number of Discharges		With Rashes	1.3	Medications		
(Including Deaths)	25			Receiving Psychoactive Drugs		44.3

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.3	80.3	1.20	85.1	1.13	84.4	1.14	84.6	1.14
Current Residents from In-County	67.1	72.7	0.92	72.2	0.93	75.4	0.89	77.0	0.87
Admissions from In-County, Still Residing	21.4	18.3	1.17	20.8	1.03	22.1	0.97	20.8	1.03
Admissions/Average Daily Census	35.4	139.0	0.25	111.7	0.32	118.1	0.30	128.9	0.27
Discharges/Average Daily Census	31.6	139.3	0.23	112.2	0.28	118.3	0.27	130.0	0.24
Discharges To Private Residence/Average Daily Census	12.7	58.4	0.22	42.8	0.30	46.1	0.27	52.8	0.24
Residents Receiving Skilled Care	91.1	91.2	1.00	91.3	1.00	91.6	1.00	85.3	1.07
Residents Aged 65 and Older	94.9	96.0	0.99	93.6	1.01	94.2	1.01	87.5	1.09
Title 19 (Medicaid) Funded Residents	77.2	72.1	1.07	67.0	1.15	69.7	1.11	68.7	1.12
Private Pay Funded Residents	15.2	18.5	0.82	23.5	0.65	21.2	0.72	22.0	0.69
Developmentally Disabled Residents	0.0	1.0	0.00	0.9	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	41.8	36.3	1.15	41.0	1.02	39.5	1.06	33.8	1.24
General Medical Service Residents	2.5	16.8	0.15	16.1	0.16	16.2	0.16	19.4	0.13
Impaired ADL (Mean)	40.8	46.6	0.87	48.7	0.84	48.5	0.84	49.3	0.83
Psychological Problems	44.3	47.8	0.93	50.2	0.88	50.0	0.89	51.9	0.85
Nursing Care Required (Mean)	7.3	7.1	1.02	7.3	1.00	7.0	1.03	7.3	0.99